SERIAL NO. 09522434 APPLICANT(S) FILING DATE MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875) CLAIMS AFTER AFTER 1st AMENDMENT 2nd AMENDMENT AS FILED IND. DEP. IND. DEP. IND. DEP. IND. DEP. IND. DEP. IND. DEP. 1 . T TOTAL TOTAL TOTAL DEP. TOTAL DEP. TOTAL TOTAL